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POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	Hour ent		03-121-01	
O.I.P.E. CLASSIFIER	1100	11/	11/19	
FORMALITY REVIEW	4 7	926	16-29-01	
RESPONSE FORMALITY REVIEW	ZM	927	09(13/01	

INDEX OF CLAIMS

•	Rejected	N	Non-elected
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50		00	╎╎ ┼┼┼┼┤├	149				
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If more than 150 claims or 10 actions staple additional sheet here